

Internship Application

Name:	
Current Address & Phone: _	
Email Address: _	
Permanent Address & Phone (please include parents name –	:es)
Date of Birth:	
Part II:	
Desired Internship Date:	
State specific issues and area	s of intererest to you:

Have you served a prior in	ternship in Washington D.C.?	
If yes, with whom?		
Skills applicable to interns	hip:	
Part III:		
Schools attended, beginning	ng with your current school:	
<u>SCHOOL</u>	ADDRESS	DATES ATTENDED
	ed in College/University, please a	
Is academic credit availabl	e for internships?	
Year in School:	Gra	duation Date:
Major:	GPA	A:
Activities/Honors:		
Career Objectives:		

Part IV:	
Advisor's Name:	
Names & Addresses of Three References:	
If selected, I hereby agree to abide by the rules and regulations for congressional en the Office of Senator Richard Shelby.	nployees and
Signature of Applicant Date	
Part V:	
Please use this page to write a brief paragraph about yourself, including the reasons you would like to intern in the Office of Senator Richard Shelby:	why
